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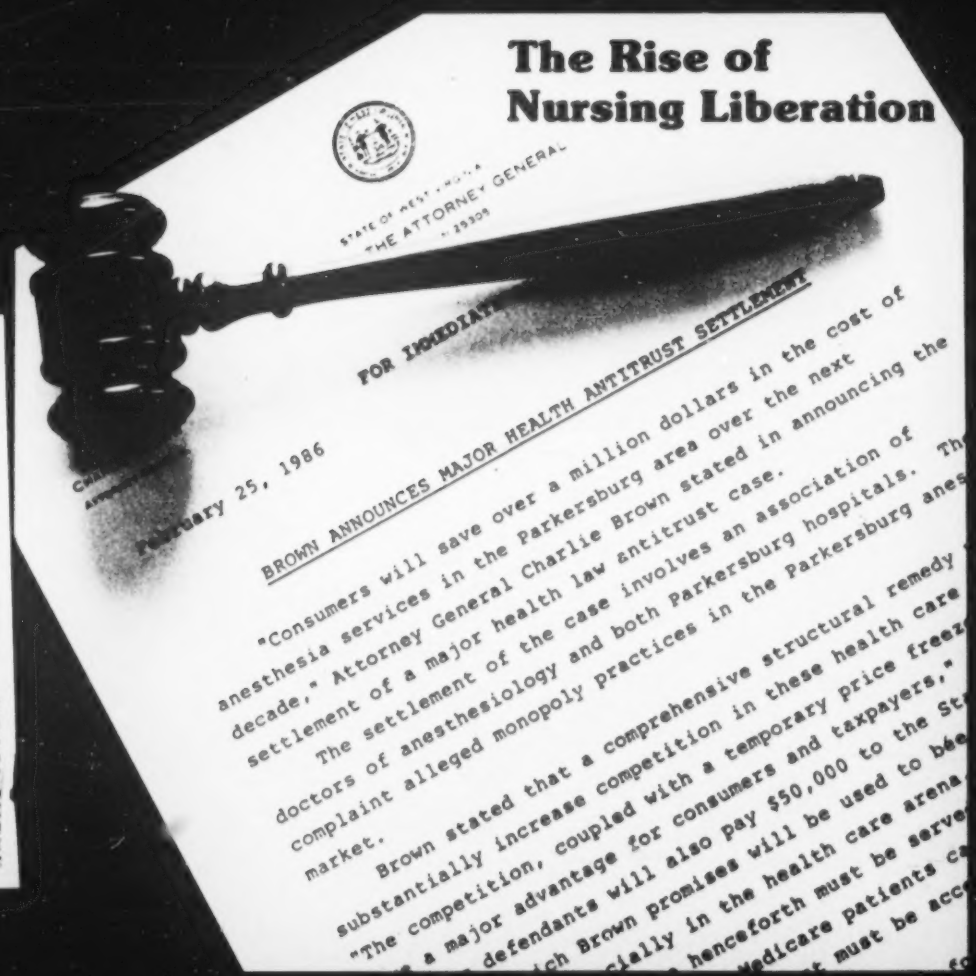
Nursing HEALTH CARE

VOLUME 7, NUMBER 9 NOVEMBER 1986

The Rise of Nursing Liberation


THE ATTORNEY GENERAL
FOR IMMEDIATE
February 25, 1986
BROWN ANNOUNCES MAJOR HEALTH ANTITRUST SETTLEMENT
"Consumers will save over a million dollars in the cost of anesthesia services in the Parkersburg area over the next decade," Attorney General Charlie Brown stated in announcing the settlement of a major health law antitrust case.
The settlement of the case involves an association of doctors of anesthesiology and both Parkersburg hospitals. The complaint alleged monopoly practices in the Parkersburg anes
market.
Brown stated that a comprehensive structural remedy substantially increase competition in these health care
"The competition, coupled with a temporary price freez
a major advantage for consumers and taxpayers,"
defendants will also pay $50,000 to the St
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CONTENTS

Cover Story

The Rise of Nursing Liberation

Continuing our trends coverage, several authors examine past and present barriers to nursing liberation and outline ways to break them down. **See pages 476 and 484.**

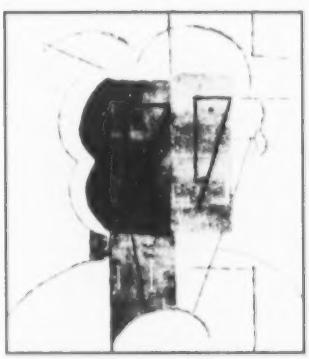
Features

476

The Right to Fight

The author—an antitrust attorney— details two cases in which nurse specialists won their battles for clinical privileges.

Susan Jenkins



496

Collaboration Can Work

This model links a school of nursing and a nursing service department to enhance patient care.

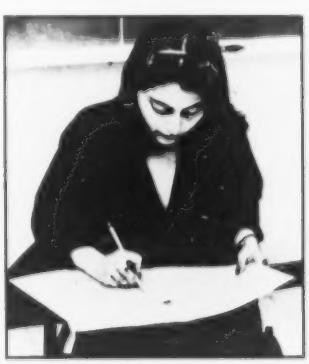
Lorna Mill Barrell
Ann B. Hamric

484

Nursing and Professionalization

Understanding both the positive and negative effects of gender on nursing will help nurses advance the profession, says the author.

Pen Rosenfeld



504

Educating Administrators

A master's program with an administration track helps RNs learn to lead.

Joanne Comi McCloskey
Karlene Kerfoot
Marilyn Moles
Sally Mathis

490

A Nurse-Managed Center: The Problems

The authors describe the pitfalls in setting up and running a university-based health care unit.

Pamela Culbert-Hinthorn
Karin D. Fiscella
Lillie M. Shortridge

Departments

471 Guest Editorial
474 Announcements
509 NLN Perspective
515 News
518 Washington Focus
520 The Marketplace
522 NLN Calendar
523 Classified

NURSING & HEALTH CARE offers diverse views on subjects of interest to readers. Articles represent the opinions of individual contributing authors and are not necessarily those of the National League for Nursing.

469

WASHINGTON FOCUS

99th Congress: Appropriations Up, Reimbursement Gains

By Kevin L. Morrissey
Director of Communications, NLN

The sun finally set on the 99th Congress, albeit a full two weeks behind schedule. Amid the flurry of eleventh hour activity, legislators agreed upon a budget reconciliation package within Gramm-Rudman deficit reduction targets and also acceptable to the administration, approved a massive $576 billion appropriations bill for government operations in FY87, made several adjustments in the Medicare and Medicaid programs, and introduced a number of proposals that will likely come to fruition in the next Congress.

Overall, nursing fared well in this session. Both the increase in appropriations for nursing education and research and the provision for direct reimbursement of nurse anesthetists under Medicare represent significant victories. On the down side, the Health Care Freedom of Choice Act, which would have enabled third party reimbursement of nurses under the Federal Employees Health Benefits Plan, never picked up needed momentum in the Senate, after passage in the House.

FY87 Appropriations Up $3.4 Million

For fiscal year 1987, $53.3 million was appropriated for nursing education and $19 million for nursing research (see detailed breakdown below).

Federal Appropriations for Nursing Education and Research

Category	FY86	FY87
Advanced Nurse Education	$16,500,000	$16,750,000
Nurse Practitioner/ Nurse Midwife Programs	12,000,000	12,000,000
Special Projects	9,500,000	9,500,000
Demonstration Projects	1,350,000	1,675,000
Advanced Nurse Traineeships	11,500,000	11,750,000
Nurse Anesthetists	800,000	800,000
Faculty Fellowships	550,000	825,000
TOTAL (Nursing Education)	$52,200,000	$53,300,000
Nursing Research	$16,700,000	$19,000,000*
GRAND TOTAL	$68,900,000	$72,300,000

**At least $2.0 million to be spent on National Research Service Awards.*

Nurse Anesthetists Gain Medicare Reimbursement

A number of provisions included in the budget reconciliation measure (H.R. 5300) affect Medicare and Medicaid. Of particular note is that nurse anesthetists may bill directly for services rendered to Medicare patients, effective October 1, 1988.

Other adjustments to the Medicare program include:

- a 1.15 percent increase in payments to hospitals in FY87;
- a formula for limiting hospital capital cost payments, beginning in the new fiscal year;
- a shift in outpatient surgery payments for hospitals from the present cost reimbursement basis to a prospective rate similar to payments to free-standing surgery centers;
- a cap on the beneficiary hospital deductible at $520 for FY87, with future increases indexed to the rate of increase in DRG rates;
- mandated hospital discharge planning and patient notification of discharge rights;
- an overall increase of 3.2 percent in payments to physicians;
- a cap on the charges of physicians who do not accept assignment, and
- increased capacity to adjust physician payment levels when they are found to be inherently unreasonable.

The exception to the overall budget-cutting scheme of the reconciliation bill is a modest growth in the Medicaid program, with eligibility expanded to certain low-income pregnant women and infants, and to certain aged or disabled persons with incomes up to federal poverty lines.

Focus on Nursing Home Reform

A significant amount of activity toward the end of the congressional session focused on legislative proposals responding to recommendations in the Institute of Medicine nursing home study, released earlier this year. Although no consensus was reached this round, the momentum was such that nursing home reform clearly will be a priority item on the agenda for the 100th Congress.

Senate amendments to H.R. 1868, which was passed by the House in 1985, were proposed by Senators John Heinz (R-Pennsylvania) and John Glenn (D-Ohio), Senate Special Aging Committee chair and ranking minority member, respectively. They called for mandatory nurses aide training, improved survey and certification procedures, and increased emphasis on patients' rights. However, H.R. 1868 did not pass the Senate before adjournment.

In addition, House Energy and Commerce Committee Chair John Dingell (D-Michigan) introduced H.R. 5450, the Medicaid Nursing Home Quality Care Amendments. This proposal contained many of the same provisions, along with elimination of the distinction between intermediate care and skilled nursing facilities.

Around the Bend

Speculation regarding health policy initiatives in the 100th Congress follows two tracks: cost-saving forays into capitated systems, vouchers, and the like on one hand, and tougher quality assurance measures on the other.